	. г	\neg
Please type a plus sign (+) inside this box	< → -	+ 1

required)

Filing

El470080871US

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

EP-7503 Attorney Docket Number **DECLARATION FOR UTILITY OR** Dennis J. Malfer **First Named Inventor DESIGN** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Filing Date Filed herewith ☐ Declaration Submitted after Initial OR Submitted Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial

Examiner Name

As a below named inventor, I he	reby declare that:				
My residence, mailing address, an	ıd citizenship are as sta	ted below next to my nar	me.		
I believe I am the original, first and names are listed below) of the sub	I sole inventor (if only or pject matter which is cla	ne name is listed below) imed and for which a pat	or an original, firs tent is sought on t	t and joint inventient invention ent	tor (if plural itled:
SECONDARY AMINE MANNICH DETERGENTS					
	(7	Title of the Invention)			
the specification of which	·	•			
is attached hereto					
OR was filed on (MM/DD/YYYY)		as United Sf	states Application I	Number or PCT	International
,				(if	f applicable).
Application Number	and was a	amended on (MM/DD/YY	YY)		арритальту.
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ider ve.	ntified specification	n, including the o	claims, as
I acknowledge the duty to disclose in-part applications, material infor PCT international filing date of the	mation which became a	Wallanie between the tilin	s defined in 37 CF ng date of the prior	R 1.56, including rapplication and	g for continuation- i the national or
I hereby claim foreign priority ben certificate, or 365(a) of any PCT i America, listed below and have certificate, or any PCT internation	also identified helow	by checking the box as	any foreian annlic	ation for nationt	or inventoria
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	oy Attached?
		(1	120	_ NO
				\vdash	H
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.					
Application Number(s)		e (MM/DD/YYYY)			
				al provisional app are listed on a	plication
		ĺ		ental priority data	
		1			
				02B attached he	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

Jac H H Way J. A. How Holly H H

iji

Man Sand San San San San

Please type a plus sign (+) inside this box

+ PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code		OR ±	Correspondence address below
Name Dennis H. Rainear			
Address Ethyl Corporation			
330 South Fourth Street Address			
City Richmond	-	State VA	ZIP 23219
USA Country	804 -	788-5516	804-788-5519 Fax
I hereby declare that all statements made herein of are believed to be true; and further that these state made are punishable by fine or imprisonment, or bo validity of the application or any patent issued thereo	ements were made w	UID TOO KNOWLOADD that willfi	"II folco etetemente and the III
NAME OF SOLE OR FIRST INVENTOR:		A petition has been fil	led for this unsigned inventor
Given Name Dennis J. (first and middle [if any])		Family Name Malfer or Surname	
Inventor's Signature Dannis of Malfer			Date 2 /2 /0 /
Residence: City Glen Allen	State VA	Country USA	Citizenship US
Mailing Address 5917 Maybrook Drive			
Mailing Address 5917 Maybrook Drive			
City Richmond VA		23259 ZIP	Country
NAME OF SECOND INVENTOR:		A petition has been fil	ed for this unsigned inventor
Given Name Andrea T. (first and middle [if any])		Family Name Noble or Surname	
Inventor's Signature MANA	<u> </u>		Date 1 - 7 - 0
Residence: City Midlothian	State VA	Country USA	US Citizenship
Mailing Address 2430 Sandy Brook Lan	е		
Mailing Address 2430 Sandy Brook Lan	ne		
City Midlothian State		ZIP 23112	Country
\blacksquare Additional inventors are being named on the $_1$	supplemental Addition	nal Inventor(s) sheet(s) PTC	

Please	type	a plus	sıgn (·	+) ınsıde	this box	\longrightarrow	+

EP7503

PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page _1_ of _1_

			_				
Name of Additional Joint Inventor,	if any:			A petition has b	een filed	for th	nis unsigned inventor
Given Name (first and middle [if	any])			Fam	ily Name	or St	urname
Wiļliam J.					Cc	luc	ci
Inventor's Signature) ,						Date 2/2/0/
Residence: City Glen Allen	St	VA ate		Country T	ISA		US Citizenship
4501 Argonne Court Mailing Address							
Mailing Address 4501 Argonne Cou	rt						
City Glen Allen	St	v.A.		ZIP 23060	Co	untry	USA
Name of Additional Joint Inventor, i	f any:			A petition has be	en filed fo	or this	unsigned inventor
Given Name (first and middle [if	any])			Fami	ly Name	or Su	ırname
Roger M.					s	hee	ts
Inventor's Signature Rodu h.	S	كسك	(Date 2/2/01
Residence: City Glen Allen	St	VA ate		Country	USA		Citizenship US
Mailing Address 10905 Tray Way							
Mailing Address 10905 Tray Way							
City Glen Allen	St	v. tate	Α	ZIP 2306	0	Coun	try USA
Name of Additional Joint Inventor, i	f any:			A petition has beer	n filed for	this t	unsigned inventor
Given Name (first and middle [if a	any])			F	amily Na	me or	Surname
Inventor's Signature	1						Date
Residence: City	Sta	te		Country			Citizenship
Mailing Address							
Mailing Address							
City	Stat	æ		7IP		Cou	into /

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Į.

Andreas and a second se

Hand Street Street

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Not yet assigned
Filing Date	Filed herewith
First Named Inventor	Dennis J. Malfer
Group Art Unit	
Examiner Name	
Attorney Docket Number	EP-7503

I hereby a	appoint:					
Prac	etitioners at 0	Customer Number			→ N	lace Customer lumber Bar Code abel here
+ Pract	itioner(s) na	med below:				
		Name			Registration I	Number
_		Dennis H. Rainear 32,486				
		Thomas Hamilton			40,46	54
<u> </u> _		James T. Moore			35,61	19
L						
as my/our a business in	attorney(s) o the United	r agent(s) to prosecute th States Patent and Traden	e application nark Office co	identif	ied above, and a	to transact all
The abo		espondence address for the ed Customer Number.	ne above-ider	ntified	application to:	
OR						
+ Firm <i>or</i> Individua	al Name	Ethyl Corporation				
Address		330 South Fourth St	reet			·
Address						7.4
City		Richmond		State	VA	Zip 23219
Country		USA				
Telephone		804-788-5000		Fax	804-788-5519)
Assig	icant/Invento	or. ord of the entire interest. S or 37 CFR 3.73(b) is enclos	See 37 CFR 3 Sed. (Form PT	.71. FO/SB/	(96).	
		SIGNATURE of Applic	ant or Assign	ee of I	Record	
Name	Denr	is J. Malfer				
Signature	1)2	mis maele	7			
Date						
NOTE: Signatures forms if more than	of all the inven	tors or assignees of record of the srequired, see below*.	ne entire interest	or their	representative(s) a	re required. Submit multiple
*Total of	_	ns are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

Carrier arms seems seems are are are seems.

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Not yet assigned
Filing Date	Filed herewith
First Named Inventor	Dennis J. Malfer
Group Art Unit	
Examiner Name	
Attorney Docket Number	EP-7503

Practitioners at OR + Practitioner(s) n	Customer Number amed below: Name Dennis H. Rainear Thomas Hamilton James T. Moore		→ ∧	36 54
as my/our attorney(s) of business in the United	or agent(s) to prosecute the ap States Patent and Trademark	plication identii Office connect	ied above, and	
The above-mention OR + Firm or	espondence address for the abned Customer Number. Ethyl Corporation	oove-identified	application to:	
Individual Name Address				
Address	330 South Fourth Street		12	
City	Richmond	State	VA	Zip 23219
Country	USA	Otate		Zip 23213
Telephone	804-788-5000	Fax	804-788-5519)
l am the: + Applicant/Invent Assignee of reconstatement unde	or. ord of the entire interest. See 3 r 37 CFR 3.73(b) is enclosed. (7 CFR 3.71. (Form PTO/SB	(96).	
	SIGNATURE of Applicant of	or Assignee of	Record	
Signature Date	T. Noble			
NOTE: Signatures of all the inver forms if more than one signature	ntors or assignees of record of the enti is required, see below*.	re interest or their	representative(s) a	re required. Submit multiple
	rms are submitted.			

Burden Hour Statement⁻ This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Diagon time o	nlua aian (I) incide th	ain hav		
Please type a i	olus sign (·	+) inside th	ns box	-	+

EI470080871US

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Not yet assigned
Filing Date	Filed herewith
First Named Inventor	Dennis J. Malfer
Group Art Unit	
Examiner Name	
Attorney Docket Number	EP-7503

I hereby appoint:					
OR	Customer Number		→ N	lace Customer lumber Bar Code abel here	
+ Practitioner(s) na	med below:				
	Name		Registration I	Number	
	Dennis H. Rainear		32,48	36	
	Thomas Hamilton		40,46	54	
	James T. Moore		35,61	19	
	r agent(s) to prosecute the application States Patent and Trademark Office c			to transact all	
	espondence address for the above-ide ed Customer Number.	ntified a	application to:		
+ Firm <i>or</i> Individual Name	Ethyl Corporation				
Address	330 South Fourth Street				
Address					
City	Richmond	State	VA	Zip 23219	
Country	USA				
Telephone	804-788-5000	Fax	804-788-5519	9	
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
	SIGNATURE of Applicant or Assig	nee of I	Record		
Name Will Signature Date	iam Ja Colucci N				
NOTE: Signatures of all the inven forms if more than one signature i	tors or assignees of record of the entire interes is required, see below*.	t or their	representative(s) a	are required. Submit multiple	
★Total of4formula	ms are submitted.				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box	 +	

EI470080871US

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR

AUTHORIZATION OF AGENT

Application Number	Not yet assigned	
Filing Date	Filed herewith	
First Named Inventor	Dennis J. Malfer	
Group Art Unit		
Examiner Name		
Attorney Docket Number	EP-7503	

OR	s at Customer Number		Place Customer Number Bar Code Label here			
+ Practitioner(s	s) named below:					
<u> </u>	Name Registration Number					
	Dennis H. Rainear		32,486			
	Thomas Hamilton		40,464			
	James T. Moore	35,619				
	(s) or agent(s) to prosecute the applicated States Patent and Trademark Office					
	correspondence address for the above ntioned Customer Number.	identified application to	o:			
Firm or Individual Name	Ethyl Corporation	Ethyl Corporation				
Address	330 South Fourth Street	330 South Fourth Street				
Address						
City	Richmond State VA Zip 23219		Zip 23219			
Country	USA					
Telephone	804-788-5000	Fax 804-788-5	Fax 804-788-5519			
I am the: + Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name	Roger M. Sheets					
Signature Rogu M. Sheets						
Date 2/2/01						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
hurdon Hour Statement, This form	is actionated to take 2 monitor to associate. They will	danaadiaa tha	and the second second			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.